8300 Greensboro Dr. Suite 1200 McLean, VA 22102 Todd Slamowitz (703) 584-8673 tslamowitz@fcclaw.com www.rcclaw.com NOT ADMITTED IN VA



July 23, 2014

ACCEPTED/FILED

JUL 23 2014

Federal Communications Commission Office of the Secretary

ORIGINAL

VIA HAND DELIVERY

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, S.W., Room TW-A306 Washington, DC 20554

Re: WT Docket No. 10-208

Carolina West Wireless, LLC

FCC Form 690 Mobility Fund Phase I Annual Report

SAC(s): 238014, 238015, 238016, 238017, 238018, 238019, 238020,

238021, 238022, 238023, 238024, 238025, 238026, 238027, 238028,

238029, 238030, 238031, 238032, 238033, 238034, 238035, 238036,

238037, 238039, 238040, 238041, 238042, 238043, 238044, 238045,

and 238046

Dear Secretary Dortch:

Please find attached a copy of each FCC Form 690 Mobility Fund Phase I Annual Report ("FCC Form 690") submitted with the Universal Service Administrative Company (USAC) by Carolina West Wireless, LLC ("CWW") pursuant to Section 54.1009 of the Commission's rules for each study area CWW is authorized to receive support.

A copy of this cover letter has been provided, which you are requested to date-stamp and return.

Sincerely,

Todd Slamowitz

Attachments

Mobility Phase 1	Fund - §54.1009 Annual Reporting		FCC Form Approved by OMB OMB 3060-1185
Data Col	lection Form		Avg. Burden Estimate per Respondent: 18 Hours
<010>	Study Area Code	238014	ACCEPTED/FILED
<015>	Study Area Name	Carolina West Wireless, Inc.	70001110711110
<020>	Program Year	2014	JUL 2 3 2014
<030>	Contact Name: Person USAC should contact with questions about this data	t Todd Slamowitz	Federal Communications Commission Office of the Secretary
<035>	Contact Telephone Number: Number of the person identified in data line	e <030> 7035848678 ext.	
<039>	Contact Email: Email of the person identified in data line <	030> tslamowitz@fcclaw.com	
	Email of the person factorines in data line	Line Hills	10-45
<040>	<041> Attach a description of the docu	, 10 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -	N) <040>
	<043> Cite the date of the Form 481 re	porting	
<050>	Carrier Contact Information (has the con	tact info. changed since prior filing? Yes or No)	<u>O</u>
		(if yes, complete the attached worksheet)	<050>
<060>	Coverage and Performance Report	(complete attached worksheet)	<060>
<070>	Urban Rate Comparability Certification	(complete attached certification)	<070> 🗸
<080>	Tribal Lands Reporting (y/n?) (Does this st	udy area cover tribal lands? Yes or No)	\circ
		(If yes, complete the attached worksheet)	<080>
<090>	Project Update Information	(complete attached worksheet)	<090>
<100>	Certifications <101> Reporting Carrier Certification	(complete attoched certification)	<101>
	<102> Agent Certification	(complete attached certification)	<102> /

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carr	ler Contact Form		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code	238014	
<015>	Study Area Name	Carolina West Wireless, Inc.	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678_ext.	7. 11.2
	Contact Email Address - Email Address of person identified in data line <030> Carrier / Mobility Fund Phase 1 Winning Bidder FCC Pariety ties Number	tslamowitz@fcclaw.com	1
<110>	FCC Registration Number		
<111>	Filing Carrier Name		
<112>	Winning Bidder Carrier Name		-
<113>	Street Address (or PO Box)		
<114>	City		
<115>	State		
<116>	Zip-Code		
<117>	Telephone Number		
<118>	Fax Number		
<119>	Email Address		
<120> <121> <122> <123> <124> <125> <126> <127> <126> <127> <127> <128>	if same as above, indicate in this box Name (First, MI, Last, Suffix) Filing Carrier Name Street Address (or PO Box) City State Zip-Code Telephone Number Fax Number Email Address		
Authorize	d Agent Information if no agent, indicate in this box		
<120>	Name (First, MI, Last, Suffix)		
<121>	Company		
<122>	Street Address (or PO Box)		
<123>	City		
<124>	State		
<125>	Zip-Code		
<126>	Telephone Number		
<127>	Fax Number		
<128>	Email Address		
1207	Lilian Addicas		WW.

(060) Coverage and Performance Report	FCC Form 690
	Ap proved by OMB
	OMB Control No. 3060-1185
	Page 3 of 8

<010>	Study Area Code	238014
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year 01/2013 - 12/2013	

	Construction Status.zip	
Electronic Shapefiles attachments		
	Name of Attached Document (.zip)	
Drive Test Results attachments		
	Name of Attached Document (.zip)	. 411.00
Scattered Site Test Results attachments		
	Name of Attached Document (.zip)	

<a2> <a3> <b1> <b2> <b3> <141> <c1> <c2> <c3> <d> <e> Certify Certify that that Drive Total Electron Test Road Road Result Miles per Miles Road Certify that Shapefil s are Resident **Total Resident** Miles Census covered es are upload Scattered Block Site Tests are Resident Population Population per per uploade ed Population per uploaded **Newly Reached** Reached by Census Newly Census (yes/n Census Block Census Block Block Reached Block State County by Service Service (yes/no) o) (yes/no) \$ee attached worksheet

[·	0		0
Percentage of Total		Percentage of Total	
Population Reached by		Road Miles covered	
Service		by Service	

(070) Urban Rate Comparability Certification Compliance	FCC Form 690
	Approved by OMB
	OM8 Control No. 3060-1185 Page 4 of 8

<010>	Study Area Code	238014
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)		
l certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on to form and in any attachments is accurate.		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date	
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:		
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) <u>Todd Slamowitz</u> carrier. I also certify that I am an officer or employee of the reporting car authorized agent; and, to the best of my knowledge, the reports and data	is authorized to submit the information reported on behalf of the reporting irrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the a provided to the authorized agent is accurate.
Name of Authorized Agent: Todd Slamowitz	
Name of Reporting Carrier: Carolina West Wireless,	, Inc.
Signature of Authorized Officer or Employee: CERTIFIED ONLINE	Date: 07/16/2014
Printed name of Authorized Officer or Employee: Lisa Mabe	
Title or position of Authorized Officer or Employee: Staff Accountant	
Telephone number of Authorized Officer or Employee: 3369735000 ext.1	1003
Study Area Code of Reporting Carrier: 238014	Filing Due Date for this form: 07/31/2014
[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authoriz	ted to File Compliance with 47 CFR §54.1009	(a)(4) on Behalf of Reporting Carrier
I, as agent for the reporting carrier, certify that I am author	ized to submit the certification on behalf of the repo	orting carrier; I have provided the data reported herein based of
data provided by the reporting carrier; and, to the best of n	ny knowledge, the information reported herein is ac	curate.
Name of Reporting Carrier:	Carolina West Wireless, Inc.	
Name of Authorized Agent or Employee of Agent:	Todd Slamowitz	
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE	Date: 07/16/2014
Printed name of Authorized Agent or Employee of Agent:	Todd Slamowitz	
Title or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
Felephone number of Authorized Agent or Employee of Agen	nt: 7035848678 ext.	
Study Area Code of Reporting Carrier: 238014	Filing Due Date for this form	07/31/2014

980) Tribe	Lands Reporting		A STATE OF S	PCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 5 of 8
<010>	Study Area Code		238014	
<015>	Study Area Name		Carolina West Wireless, Inc.	
<020>	Program Year		2014	
<030>	Contact Name - Person USAC should contact regarding th		Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identifie	d in data line <030>	7035848678 ext.	
<039>	Contact Email Address - Email Address of person identifie	ed in data line <030>	tslamowitz@fcclaw.com	
<142>	County			
<144>	Tribal Land(s) on which ETC Serves		3	
<145>	Tribal Government Engagement Obligation	Name of Attached Docume	ent (.pdf)	

If your company serves Tribal lands, please select (Yes,No, NA) for each of these boxes to confirm the status described on the attached PDF, on line 145, demonstrates coordination with the Tribal government pursuant to § 54.1004 includes:

		Select (Yes,No, NA)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	
<147>	Feasibility and sustainability planning;	
<148>	Marketing services in a culturally sensitive manner;	
<149>	Compliance with Rights of way processes	
<150>	Compliance with Land Use permitting requirements	
<151>	Compliance with Facilities Siting rules	
<152>	Compliance with Environmental Review processes	
<153>	Compliance with Cultural Preservation review processes	
<154>	Compliance with Tribal Business and Licensing requirements.	

(090) Project	t Update Information	Approved by OMB
		OM8 Control No. 3060-1185 Page 6 of 8
		1 05 V N O
<010>	Study Area Code	238014
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<200>	Date Authorized to Receive Support	07/18/2013
<201>	Targeted Completion Date	02/05/2016
<202>	Total Mobility Fund Support Awarded	1230600.0
<203>	Total Mobility Fund Support Disbursed	410200.0
<204>	Support Applied to Network Design	7974.79
<205>	Support Applied to Construction	11661.42
<206>	Support Applied to Deployment	
<207>	Support Applied to Maintenance	
<208>	Certify Network will Support 3G Mobile Service (Yes / No)	\circ
<209>	Certify Network will Support 4G Mobile Service (Yes / No)	O
<210>	Actual Completion Date	
<211>	Project Status Description (attached)	CWW_PSD_NC.pdf {Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.	and reconstruction of control of reducing a second
<212>	Status of Network Deployment - Network Design	✓
<213>	Status of Network Deployment - Construction	1
<214>	Status of Network Deployment - Deployment	
<215>	Status of Network Deployment - Maintenance	
<216>	Project Budget Status	√
<217>	Project Plan Status	✓

(101) Certification - Reporting Carrier	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185 Page 7 of 8

<010>	Study Area Code	238014
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

e accuracy of the annual reporting requirements for Mobility Fund recipients; and, to the curate.
Arate.
Date
Due Date for this form:

(102) Certification - Agent / Carrier Fi	CC Form 690
	pproved by OMB
	MB Control No. 3060-1185 age 8 of 8

<010>	Study Area Code	238014
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for Mobility Fund Recipients on Behalf of Reporting Carrier I certify that (Name of Agent) Todd Slamowitz is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. Name of Authorized Agent: Todd Slamowitz Name of Reporting Carrier: Carolina West Wireless, Inc. CERTIFIED ONLINE Signature of Authorized Officer: Date: 07/16/2014 Printed name of Authorized Officer: Lisa Mabe Title or position of Authorized Officer: Staff Accountant Telephone number of Authorized Officer: 3369735000 ext.1003 Study Area Code of Reporting Carrier: 238014 Filing Due Date for this form: 07/31/2014 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for Mobility Fund R	ecipients on Behalf of Reporting Carrier
, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for Mobility Fund re reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the informat	
Name of Reporting Carrier: Carolina West Wireless, Inc.	
Name of Authorized Agent or Employee of Agent: Todd Slamowitz	
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: 07/16/2014
Printed name of Authorized Agent or Employee of Agent: Todd Slamowitz	
itle or position of Authorized Agent or Employee of Agent FCC Legal Counsel	
elephone number of Authorized Agent or Employee of Agent: 7035848678 ext.	
tudy Area Code of Reporting Carrier: 238014 Filing Due Date for this form:	07/31/2014

Attachments

-1	Security Sec	200 (200) (200)	Take the control of t	TO SHARE WAS AN		300000000000000000000000000000000000000	200000000000000000000000000000000000000
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-1	\$900 SECURIOR		Contract Contract	Marie Committee	3900 PS 500 PS	A 100 PAGE	

FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	238014
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2013 - 12/2013

<141>

<a1></a1>	<a2></a2>	<93>	<b1></b1>	<b2></b2>	<b3></b3>	<c1></c1>	<c2></c2>	<c3></c3>	<d>></d>	<e>></e>	, ds
State	County	Census Block	Resident Population per Census Block	Resident Population Newly Reached by Service	Total Resident Population Reached by Service	Road Miles per Census Block	Road Miles per Census Block Newly Reached	Total Road Miles covered per Census Block	Certify that Electronic Shapefiles are uploaded (yes/no)	Certify that Drive Test Results are uploaded (yes/no)	Certify that Scattered Site Tests are uploaded (yes/no)
NC	Alexander	0000	0	0	0	0.0	0.0	0.0	Yes		
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Percentage of
Total Population
Reached by
Service

0			

Percentage of Total Road Miles covered by Service

0			

Caroline West Wireless, Inc.

. . . .

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules, ¹ Carolina West Wireless, Inc. ("Filer") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code that was provided by Filer in its FCC Form 680 filed in conjunction with its Auction 901 winning bids.

In its FCC Form 680, Filer explained that in order to provide the most advanced wireless broadband service available to date, Filer is using the proceeds from auction 901 to expand its footprint with new cell sites, and supplementing its existing network footprint with 4G service. Specifically, utilizing the 1900 MHz, 1700/2100 MHz spectrum bands, along with the 700 MHz spectrum band, Filer intends to provide high speed, broadband data services over 4G. Further, installation of new cell sites and the overlay of 4G will enable Filer to meet its public interest obligations to provide rural North Carolina citizens with access to advanced telecommunications and information technologies that are reasonably comparable to those available in urban areas.

As of this date Filer had completed its network design, and has commenced construction of its network. Filer anticipates that it will compete construction and deploy the network in the areas associated with this study code by no later than the construction deadline of July 19, 2016.

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

FCC Form 690 - Construction Status

Carolina West Wireless, Inc. has not yet completed construction with respect to the SAC associated with this filing.

	Fund §54.1009 Annual Reporting lection Form		FCC Form Approved by OMB OMB 3060-1185 Avg. Burden Estimate per Respondent: 18 Hours
<010>	Study Area Code	238015	
<015>	Study Area Name	Carolina West Wireless, Inc.	ACCEPTED/FILED
<020>	Program Year	2014	2014
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz	JUL 2 3 2014
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.	Office of the Secretary
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com	
1000 CO 11 PORTO			
<040>	Has the information required pursuant to §54.1009 <041> Attach a description of the documents file <042> Cite the Study Area Code (SAC) for the Fo <043> Cite the date of the Form 481 reporting	ed with the Form 481 reporting	1 <040> O
<050>		inged since prior filling? Yes or No) (If yes, complete the attached worksheet)	<050>
<060>	Coverage and Performance Report	(complete attached worksheet)	<060>
<070>	<u>Urban Rate Comparability Certification</u>	(complete attached certification)	<070>
<080>	Tribal Lands Reporting (y/n?) (Does this study area cover	er tribal lands? Yes or No)	$\circ \circ$
		(If yes, complete the attached worksheet)	<080>
<090>	Project Update Information	(complete attached worksheet)	<090>
<100>	Certifications <101> Reporting Carrier Certification (comp	lete attached certification)	<101>
	<102> Agent Certification /comp	lete attached certification)	<102>

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OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

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(050) Carr	ler Contact Form		FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 2 of 8
<010>	Study Area Code	238015	
<015>	Study Area Name	Carolina West Wireless, Inc.	
<020>	Program Year	2014	
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder		
<110>	FCC Registration Number		
<111>	Filing Carrier Name		
<112>	Winning Bidder Carrier Name		
<113>	Street Address (or PO Box)	1-11-	
	STATE OF THE PROPERTY OF THE P		
<114>	City		
<115>	State		
<116>	Zip-Code		
<117>	Telephone Number	7240	
<118>	Fax Number		
<119>	Email Address		***************************************
<120> <121> <122> <122> <123>	formation if same as above, indicate in this box Name (First, MI, Last, Suffix) Filing Carrier Name Street Address (or PO Box) City		
<124>	State		
<125>	Zip-Code		
<126>	Telephone Number		
<127>	Fax Number		
<128>	Email Address		
	0 - 100		
Authorize	d Agent Information if no agent, indicate in this box		
<120>	Name (First, MI, Last, Suffix)	1850	
<121>	Company		
<122>	Street Address (or PO Box)		
<123>	City		
<124>	State		
<125>	Zip-Code -		
<126>	Telephone Number		
<127>	Fax Number	0)	
<128>	Email Address	***	
-120	Enton radicess		

(060) Co	verage and Performance Report			FCC Form 690 Ap proved by OMB OMB Control No. 3060-1185 Page 3 of 8
<010>	Study Area Code		238015	
<015>	Study Area Name		Carolina West Wireless, Inc.	
<020>	Program Year	÷	2014	Hate Control of the C
<030>	Contact Name - Person USAC should contact regarding th	is data	Todd Slamowitz	
<035>	Contact Telephone Number - Number of person identified	d in data line <030>	7035848678 ext.	
<140>	Coverage and Performance Report Year 01/2013 - :	12/2013	5103 11.	
	Electronic Shapefiles attachments	Constructi	on Status.zip	
		Name of Atto	ached Document (.zip)	
	Drive Test Results attachments	5.00		
		Name of Atta	ched Document (.zip)	
	Scattered Site Test Results attachments			

Name of Attached Document (.zip)

<a2> <a3> <b1> <b2> <bs/><bs/><c1> <c2> <141> <d> Certify Certify that that Drive Total Electron Test Road Result ic Road Road Miles per Miles Shapefil Certify that s are Resident **Total Resident** Miles Census upload Scattered covered es are Population Block Site Tests are Resident Population per uploade ed per Population per Newly Reached Reached by (yes/n uploaded Census Newly Census Census Block Census Block (yes/no) o) State County by Service Service Block Reached Block (yes/no) -- \$ee attached worksheet

0	0	
Percentage of Total	Percentage of Total	
Population Reached by	Road Miles covered	
Service	by Service	

(070) Urban Rate Comparability Certification Compliance	FCC Form 690
and the second of the second o	Approved by OMB
[1] 李相思"PD"(1) 20 20 10 10 10 10 10 10 10 10 10 10 10 10 10	OMB Control No. 3060-1185
	Page 4 of 8

<010>	Study Area Code	238015
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of O	officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)
I certify that I am an officer or employee of the reporting carr form and in any attachments is accurate.	ier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can b	e punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

certify that (Name of Agent) Todd Slamowitz	is authorized to submit the information reported on behalf of the reporting
	arrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the
authorized agent; and, to the best of my knowledge, the reports and d	ta provided to the authorized agent is accurate.
Name of Authorized Agent: Todd Slamowitz	
Name of Reporting Carrier: Carolina West Wirele	s, Inc.
Signature of Authorized Officer or Employee: CERTIFIED ONLINE	Date: 07/16/2014
Printed name of Authorized Officer or Employee: Lisa Mabe	
Title or position of Authorized Officer or Employee: Staff Accounta	t
Telephone number of Authorized Officer or Employee: 3369735000 ex	.1003
Study Area Code of Reporting Carrier: 238015	Filing Due Date for this form: 07/31/2014
Persons willfully making false statements on this form can be punished	y fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment
그는 사람들이 가지 하다 하다면 하셨다면 하지만 나를 들어가지 않아 가지 않아 있다면 하는데 하다 되었다면 하는데 이렇게 하는데 하다 하다 하다 하다.	18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authoriz	eed to File Compliance with 47 CFR §54.1009(a)	(4) on Behalf of Reporting Carrier
as agent for the reporting carrier, certify that I am authori	ized to submit the certification on behalf of the reporti	ing carrier; I have provided the data reported herein based or
ata provided by the reporting carrier; and, to the best of m	ny knowledge, the information reported herein is accur	rate.
ame of Reporting Carrier:	Carolina West Wireless, Inc.	
ame of Authorized Agent or Employee of Agent:	Todd Slamowitz	
gnature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE	Date: 07/16/2014
inted name of Authorized Agent or Employee of Agent:	Todd Slamowitz	
tle or position of Authorized Agent or Employee of Agent	FCC Legal Counsel	
lephone number of Authorized Agent or Employee of Ager	nt: 7035848678 ext.	
udy Area Code of Reporting Carrier: 238015	Filing Due Date for this form:	07/31/2014

(080) Triba	al Lands Reporting			FCC Form 690
			provide the second	Approved by OMB OMB Control No. 3060-1185
		aw W		Page 5 of 8
<010>	Study Area Code		238015	
<015>	Study Area Name		Carolina West Wireless, I	inc.
<020>	Program Year		2014	
<030> <035>	Contact Name - Person USAC should contact regarding Contact Telephone Number - Number of person identif	_	Todd Slamowitz	
<039>	Contact Email Address - Email Address of person identifi			
<142>	State			
<143>	County			
	State Control of the			
<144>	Tribal Land(s) on which ETC Serves		MUNICO-DUI -	ennengu numanene
<145>	Tribal Government Engagement Obligation			
		Name of Attach	ed Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, leach of these boxes to confirm the status described on PDF, on line 145, demonstrates coordination with the government pursuant to § 54.1004 includes:	the attached		
			Calant	
<146>	Needs assessment and deployment planning with a for community anchor institutions;	cus on Tribal	Select (Yes,No, NA)	
<147>	Feasibility and sustainability planning;			
<148>	Marketing services in a culturally sensitive manner;			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements			
<151>	Compliance with Facilities Siting rules			
<152>	Compliance with Facilities Siting rules Compliance with Environmental Review processes			
<153>		e		
	Compliance with Cultural Preservation review processe			
<154>	Compliance with Tribal Business and Licensing requiren	Hellis.	1 1	

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(090) Project	Update Information	FCC Form 690 Approved by OMB OMB Control No. 3060-1185 Page 6 of 8
<010>	Study Area Code	238015
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<200> <201>	Date Authorized to Receive Support Targeted Completion Date	07/18/2013
	2000 - 20	
<202> <203>	Total Mobility Fund Support Awarded Total Mobility Fund Support Disbursed	60433.33
<204>	Support Applied to Network Design	7974.79
<205>	Support Applied to Construction	2144.38
<206>	Support Applied to Deployment	1 V V
<207>	Support Applied to Maintenance	
<208>	Certify Network will Support 3G Mobile Service (Yes / No)	\circ
<209>	Certify Network will Support 4G Mobile Service (Yes / No)	⊙ ○
<210>	Actual Completion Date	
<211>	Project Status Description (attached)	CWW_PSD_NC.pdf
<212>	Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate. Status of Network Deployment - Network Design	{Name of PDF attached}
<213>	Status of Network Deployment - Construction	
<214>	Status of Network Deployment - Deployment	
<215>	Status of Natwork Deployment - Maintenance	

<216> Project Budget Status <217> Project Plan Status

(101) Certification - Reporting Carrier Approved by OMB Control Page 7 of 8
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<010>	Study Area Code	238015
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for Mobility Fund recipients; and, to the lest of my knowledge, the information reported on this form and in any attachments is accurate.		
Name of Reporting Carrier:		
Signature of Authorized Officer:	Date	
Printed name of Authorized Officer:		
Title or position of Authorized Officer:		
Telephone number of Authorized Officer:	NAMES OF THE PROPERTY OF THE P	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	

[102] Certification - Agent / Carrier	FCC Form 690
	Approved by OMB
	OM8 Control No. 3060-1185
	Page 8 of 8

<010>	Study Area Code	238015
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for Mobility Fund Recipients on Behalf of Reporting Carrier I certify that (Name of Agent) Todd Slamowitz is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate. Name of Authorized Agent: Todd Slamowitz Name of Reporting Carrier: Carolina West Wireless, Inc. CERTIFIED ONLINE Signature of Authorized Officer: Date: 07/16/2014 Printed name of Authorized Officer: Lisa Mabe Title or position of Authorized Officer: Staff Accountant Telephone number of Authorized Officer: 3369735000 ext.1003 Study Area Code of Reporting Carrier: 238015 Filing Due Date for this form: 07/31/2014 Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for Mobility Fund Recipients on Behalf of Reporting Carrier I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.		
Name of Authorized Agent or Employee of Agent: Todd Slamowitz		
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date: 07/16/2014	
Printed name of Authorized Agent or Employee of Agent: Todd Slamowitz		
Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel		
elephone number of Authorized Agent or Employee of Agent: 7035848678 ext.		
Study Area Code of Reporting Carrier: 238015 Filing Due Date for this form:	07/31/2014	

Attachments

(060) Coverage and Performance Report	FCC Form 690 Approved by OMB
	OMB Control No. 3060-1185

<010>	Study Area Code	238015
<015>	Study Area Name	Carolina West Wireless, Inc.
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2013 - 12/2013

cal> cal> cal> cal> cbl> cb2> cb3> cc1> cc2> cc3> cd> ce> cb> <141> Certify that Certify that Certify that Resident **Total Resident** Road Miles **Total Road** Electronic Drive Test **Scattered Site** per Census Population Population Road Miles Miles Shapefiles are Results are Tests are Resident per Census Block Newly Block Reached uploaded (yes/no) Population per Reached by uploaded Newly Reached covered per uploaded Census Block County Alleghany Reached Census Block (yes/no) (yes/no) Census Block by Service Service State 0000 NC 0 0 0.0 Yes

> Percentage of Total Population Reached by Service

1.

0

Percentage of Total Road Miles covered by Service

0

Caroline West Wireless, Inc.

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules, ¹ Carolina West Wireless, Inc. ("Filer") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code that was provided by Filer in its FCC Form 680 filed in conjunction with its Auction 901 winning bids.

In its FCC Form 680, Filer explained that in order to provide the most advanced wireless broadband service available to date, Filer is using the proceeds from auction 901 to expand its footprint with new cell sites, and supplementing its existing network footprint with 4G service. Specifically, utilizing the 1900 MHz, 1700/2100 MHz spectrum bands, along with the 700 MHz spectrum band, Filer intends to provide high speed, broadband data services over 4G. Further, installation of new cell sites and the overlay of 4G will enable Filer to meet its public interest obligations to provide rural North Carolina citizens with access to advanced telecommunications and information technologies that are reasonably comparable to those available in urban areas.

As of this date Filer had completed its network design, and has commenced construction of its network. Filer anticipates that it will compete construction and deploy the network in the areas associated with this study code by no later than the construction deadline of July 19, 2016.

. . . .

Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

FCC Form 690 - Construction Status

. . .

Carolina West Wireless, Inc. has not yet completed construction with respect to the SAC associated with this filing.